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This is an expansion of part iv of the original proposal ("Determinants of trends in US etc..." 22.11.93). Parts iii and v of this proposal would be postponed to give preference to this more recent proposal. Although £25,000 is requested for this total project, it may be possible to negotiate for less.

Action: Negotiate with PNL for a lower price on overall project. If not possible take additional \$12,500 from 1994 budget and go ahead on project.

## IARC related proposals:

Recommendation: All Peters recommendations for possible follow-up work relevant to the IARC study have been covered through other sources except the proposal on Diet. It was agreed that the proposal from the TMA to sponsor this review should be given priority, accepting that PM would have to be content that the final price was reasonable and that a suitable first author with expertise on diet was found, (Rothmans have already suggested they have some people in mind).

Action: RDE to ring Mike Wilson to encourage TMA to proceed and to outline PMs conditions for contributing.

# P N Lee project proposals - Status 28th March 1994

Following the meeting on 25th March, to discuss the proposals for P N Lee proposals, decisions were made to proceed as follows:

## **Hungarian Autopsy Studies:**

The accuracy of diagnosis studies may give some indications of weaknesses in epidemiology in general terms, but is not directly applicable to ETS studies and therefore cannot be considered a high priority for S&T. However, as part of our responsibility in acting as scientific managers of this project for the legal sponsors within PM, there are some further investigations to be made to decide on the value of extending the project further. The main question at the moment stems around whether or not the hungarians apply all the available diagnostic tools to the same extent as other countries, (specifically US). It should be possible to compare the frequency of application of the diagnostic techniques in the cases reported in the 2 institutes with similar institutes in the US.

Recommendation: S&T would recommend that such a comparison be made, (using a US consultant), to establish any similarities or differences. If there are no differences and the two institutes can be seen as appropriate examples, then there is little justification for investing further. If however there are major differences, it would be desireable to study a centre such as the Institute for Pulmonology in Hungary. (Of course it would need to be established that this constituted a better comparison.)

It is therefore recommended that any visit to Hungary to meet Kendrey and Szende be postponed until such information is available.

Action: Pass on recommendations above to Tony Andrade.

Inform Peter Lee of situation and postpone trip to Hungary to later date.

#### Accuracy of Diagnosis Review Publication:

Recommendation: Support for the review would only be encouraged if it could be guaranteed to be published in a peer reviewed form. We would not recommend funding it entirely ourselves, (depending on actual costs) but preferably jointly with other companies.

Action: Ask Peter Lee for confirmation of Peer reviewed publishing possibilities and for better cost estimates.

RDE to contact Chris Proctor re B-AT support for publication.

#### **Lung Cancer Mortality Trends:**

Recommendation: £12,500 remaining on accruals to be used for the proposal outlined in (6) "Can variations in lung Cancer mortality rates in Western Europe be Explained by Cigarette Consumption." dated 3.2.94.